



## Baishideng Publishing Group Co., Limited

Flat C, 23/F., Lucky Plaza,  
315-321 Lockhart Road,  
Wan Chai, Hong Kong, China

### ESPS Peer-review Report

**Name of Journal:** World Journal of Gastroenterology

**ESPS Manuscript NO:** 1839

**Title:** Intrahepatic cholangiocarcinoma diagnosed via endoscopic retrograde cholangiopancreatography with a short double-balloon enteroscope

**Reviewer code:** 00070900

**Science editor:** Huang, Xin-Zhen

**Date sent for review:** 2013-01-09 13:20

**Date reviewed:** 2013-01-18 15:51

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

### COMMENTS TO AUTHORS

The method are not novel, pre-cutting and brush cytological examination through DB-ERCP was introduced in WJG last year by Takashi et al. To make of intrahepatic cholangiocarcinoma by DB-ERCP is interesting, so may be published briefly.



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**Name of Journal:** World Journal of Gastroenterology

**ESPS Manuscript NO:** 1839

**Title:** Intrahepatic cholangiocarcinoma diagnosed via endoscopic retrograde cholangiopancreatography with a short double-balloon enteroscope

**Reviewer code:** 00289686

**Science editor:** Huang, Xin-Zhen

**Date sent for review:** 2013-01-09 13:20

**Date reviewed:** 2013-01-22 07:11

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> [ Y] Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

## COMMENTS TO AUTHORS

I read with interest the paper and it really looks acceptable as it is.

**ESPS Peer-review Report**

**Name of Journal:** World Journal of Gastroenterology

**ESPS Manuscript NO:** 1839

**Title:** Intrahepatic cholangiocarcinoma diagnosed via endoscopic retrograde cholangiopancreatography with a short double-balloon enteroscope

**Reviewer code:** 00069461

**Science editor:** Huang, Xin-Zhen

**Date sent for review:** 2013-01-09 13:20

**Date reviewed:** 2013-01-29 02:35

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

**COMMENTS TO AUTHORS**

To \_\_\_\_\_ the \_\_\_\_\_ Editors,  
28.01.2012

The difficulties of endoscopic retrograde cholangiopancreatography in patients with previous abdominal surgery such as Billroth II gastrectomy, partial gastrectomy with gastrojejunostomy and Roux-en-Y reconstruction have been known. An anterior oblique-viewing endoscope and double-balloon enteroscope appear to be useful in performing endoscopic retrograde cholangiopancreatography in the post-surgical patient. 1- Sen-Yo M, Kaino S, Suenaga S, Uekitani T, Yoshida K, Harano M, Sakaida I. Utility of the Anterior Oblique-Viewing Endoscope and the Double-Balloon Enteroscope for Endoscopic Retrograde Cholangiopancreatography in Patients with Billroth II Gastrectomy. *Gastroenterol Res Pract.* 2012;2012:389269. doi: 10.1155/2012/389269. Epub 2012 Sep 30. 2- Siddiqui AA, Chaaya A, Shelton C, Marmion J, Kowalski TE, Loren DE, Heller SJ, Haluszka O, Adler DG, Tokar JL. Utility of the Short Double-Balloon Enteroscope to Perform Pancreaticobiliary Interventions in Patients with Surgically Altered Anatomy in a US Multicenter Study. *Dig Dis Sci.* 2012 Sep 14. [Epub ahead of print] 3- Cho S, Kamalapor P, Kandel G, Kortan P, Marcon N, May G. 'Short' double-balloon enteroscope endoscopic retrograde cholangiopancreatography in patients with a surgically altered upper gastrointestinal tract. *Can J Gastroenterol.* 2011 Nov;25(11):615-9. This case report entitled "Intrahepatic cholangiocarcinoma diagnosed via endoscopic retrograde cholangiopancreatography with a short double-balloon enteroscope" (Manuscript Number 1839) has reported a case of intrahepatic cholangiocarcinoma via ERCP with a short DBE. Overall study appears to be contributory to the current literature and the



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manuscript is quite well-written. The language is good, grammatical and spelling errors are rare. Total length of the manuscript appears to be optimum. However, it requires a number of revisions.

1. A few grammatical and spelling errors noticed throughout the text should be corrected. ERCP misspelt as EECF in the abstract should be corrected.
2. Authors should add schematic image to point out biopsy moment in order to demonstrate and understand the case with a previous abdominal surgery better. As a conclusion, the manuscript could be accepted in order to be published in your journal after completing the above revisions.

Yours sincerely.